

**CRS Medical Coverage for 2013**  
**80/20 Preferred Provider Organization (PPO)**

<p style="text-align: center;"><b>Monthly Premium (Deduction From Pension Check)</b></p>	<p style="text-align: center;"><b>Pensioner Only</b>  Non-Medicare: \$46.33  Medicare Eligible: \$23.15</p> <p style="text-align: center;"><b>Pensioner + Child(ren)</b>  Non-Medicare: \$62.87  Medicare Eligible: \$39.69</p>	<p style="text-align: center;"><b>Pensioner + Spouse</b>  Both Non-Medicare: \$91.85  Non-Medicare + Medicare Eligible: \$68.67  Both Medicare Eligible: \$45.49</p> <p style="text-align: center;"><b>Pensioner + Spouse + Child(ren)</b>  Both Non-Medicare: \$106.86  Non-Medicare + Medicare Eligible: \$83.68  Both Medicare Eligible: \$60.49</p>
	<b><u>In Network</u></b>	<b><u>Out of Network</u></b>
<p style="text-align: center;"><b>Annual Deductible</b></p>	<p style="text-align: center;">Single: \$300  Family: \$600</p>	<p style="text-align: center;">Single: \$600  Family: \$1,200</p>
<p style="text-align: center;"><b>Annual Out-of-Pocket Maximum</b></p>	<p style="text-align: center;">Single: \$1,500  Family: \$3,000  (Includes Deductible &amp; Coinsurance)</p>	<p style="text-align: center;">Single: \$3,000  Family: \$6,000  (Includes Deductible &amp; Coinsurance)</p>
<p style="text-align: center;"><b>Rx - Retail Copay</b></p>	<p style="text-align: center;">Generic: \$10.00  Brand: \$20.00  Non Formulary Brand: \$30.00  No Out-of-Pocket Limit</p>	<p style="text-align: center;">Not Covered</p>
<p style="text-align: center;"><b>Rx - Mail Order 90 Day Supply Copay</b></p>	<p style="text-align: center;">Generic: \$20.00  Brand: \$40.00  Non Formulary Brand: \$60.00  No Out-of-Pocket Limit</p>	<p style="text-align: center;">Not Available</p>